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CENTRAL FAX CENTER****AUG 01 2005****DATE:** 08/01/2005**TO:** Examiner PATEL, Nitin C. **FAX NO.:** 571-273-8300
USPTO GPAU 2116**FROM:** Ryan S. Davidson
Reg. No.: 51,596**RE U.S. App. No.:** 10/083,875, filed 02/27/2002**Applicant(s):** Carl MIZUYABU et al.**Atty Dkt No.:** 1376-0200080**Title:** SYSTEM FOR REDUCED POWER CONSUMPTION BY
MONITORING INSTRUCTION BUFFER AND METHOD THEREOF**NO. OF PAGES (including Cover Sheet):** 17**MESSAGE:**

Attached please find:

- Transmittal Form (1 pg)
- Fee Transmittal Form (1 pg)
- Response to Final Office Action (14 pgs)

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PTO/SB/21 (09-04)

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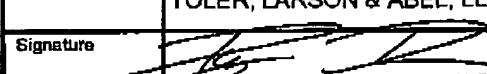
(to be used for all correspondence after initial filing)

		Application Number	10/083,875
		Filing Date	02/27/2002
		First Named Inventor	Carl MIZUYABU et al.
		Art Unit	2116
		Examiner Name	PATEL, Nitin C.
Total Number of Pages In This Submission	16	Attorney Docket Number	1376-0200080

ENCLOSURES (Check all that apply)

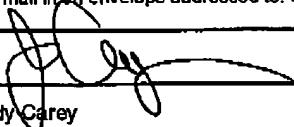
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	TOLER, LARSON & ABEL, LLP		
Signature			
Printed name	Ryan S. Davidson		
Date	1 August 2005	Reg. No.	51,596

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name

Judy Carey

Date

8/1/05

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Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/083,875
		Filing Date	02/27/2002
		First Named Inventor	Carl MIZUYABU et al.
		Examiner Name	PATEL, Nitin C.
		Art Unit	2116
		Attorney Docket No.	1376-0200080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER AUG 01 2005	
TOTAL AMOUNT OF PAYMENT (\$) 400.00			

METHOD OF PAYMENT (check all that apply)

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<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-0441</u> Deposit Account Name: <u>ATI Technologies, Inc.</u>				

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<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=			
HP = highest number of total claims paid for, if greater than 20					

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
5	2	200.00	400.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

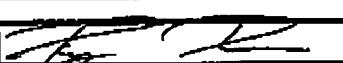
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	<u>Fees Paid (\$)</u>

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other:

SUBMITTED BY			
Signature			Registration No. 51,596 (Attorney/Agent)
Name (Print/Type)	Ryan S. Davidson		
			Telephone 512-327-5515
			Date 1 August 2005

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